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# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission: 7

Application Number 10/036,677

Filing Date December 21, 2001

First Named Inventor Scott Swix

Art Unit 2611

Examiner Name Bui, Kieu Oanh T.

Attorney Docket Number BS01421

**ENCLOSURES**

(Check all that apply)

☒ Fee Transmittal Form☒ Fee Attached☐ Amendment/Reply☐ After Final☐ Affidavits/declaration(s)☐ Extension of Time Request☐ Express Abandonment Request☒ Information Disclosure Statement☐ Certified Copy of Priority Document(s)☐ Response to Missing Parts/Incomplete Application☐ Response to Missing Parts under 37 CFR 1.52 or 1.53☐ Drawing(s)☐ Licensing-related Papers☐ Petition☐ Petition to Convert to a Provisional Application☐ Power of Attorney, Revocation  
Change of correspondence Address☐ Terminal Disclaimer☐ Request for Refund☐ CD, Number of CD(s)☐ After Allowance Communication to Group☐ Appeal Communication to Board of Appeals  
and Interferences☐ Appeal Communication to Group  
(Appeal Notice, Brief, Reply Brief)☐ Proprietary Information☐ Status Letter☐ Other Enclosure(s) (please identify below):

Remarks:

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Name (Print/Type)

Bambi Faivre Walters

Reg. No.: 45,197

Signature

*Bambi Faivre Walters*

Date

9/16/05

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Name (Print/Type)

Maureen M. Pettine

Date

09/20/2005

Signature

*Maureen M. Pettine*

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SEP 20 2005

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Scott Swix, et al.      Group Art Unit: 2611  
Application No.: 10/036,677      Examiner: Bui, Kieu Oanh T.  
Filed: December 21, 2001  
Title: "Method and System for Managing Timed Responses to A/V Events in Television Programming"

VIA FACSIMILE 571-273-8300

Attn: Examiner Bui, Kieu Oanh T.

## 37 C.F.R. § 1.8 CERTIFICATE OF TRANSMISSION

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September 20, 2005

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INFORMATION DISCLOSURE STATEMENT

Pursuant to 37 CFR §§1.56, 1.97, and 1.98, the attention of the Patent and Trademark Office is hereby directed to the references listed on the attached Form PTO 1449 (p. 1).

This Information Disclosure Statement is being submitted after the mailing of a first Office Action in this application and therefore, the certification fee is believed to be required (37 CFR § 1.97b(3)).

It is respectfully requested that the references listed on the attached form be expressly considered by the Examiner and be made of record in the application and appear among the "References Cited" on any patent to issue therefrom.

Respectfully submitted,



Bambi F. Walters  
Attorney for Applicants  
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Date: 9/16/05

SEP 20 2005 12:59PM WALTERS

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# FEE TRANSMITTAL for FY 2005

☐ Applicant claims small entity status. See 37 CFR 1.27

Application Number	10/036,677
Filing Date	December 21, 2001
First Named Inventor	Scott Swix
Examiner Name	Bui, Kieu Oanh T.
Art Unit	2611
Attorney Docket No.	BS01421

TOTAL AMOUNT OF PAYMENT **\$180.00**

## METHOD OF PAYMENT (check all that apply)

☐ Check ☒ Credit Card ☐ Money Order ☐ None ☐ Other  
☐ Deposit Account Deposit Account No. 19-2167

Deposit Account Name:

## The Director is authorized to: (check all that apply)

☒ Charge fee(s) indicated below  
☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17

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☒ Credit any overpayments

## FEE CALCULATION

### 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

### 2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180
Total Claims		
- 20 or HP = _____	Extra Claims	Fee (\$)
	x _____	Fee Paid (\$)
	= _____	
	Multiple Dependent Claims	Fee (\$)
	Fee Paid (\$)	

HP=highest number of independent claims paid for, if greater than 3.

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
- 3 or HP = _____	x _____		
	= _____		

HP=highest number of independent claims paid for, if greater than 3

### 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250.00 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Fee (\$)	Fee Paid (\$)
- 100 = _____	/ 50	(round up) x _____	
		= _____	

### 4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Supplemental IDS

\$180.00

### SUBMITTED BY:

Name (Print/Type)			Complete (if applicable)		
Bambi F. Walters			45,197	Telephone:	(757) 253-5729
Registration No. (Attorney/Agent)					
Signature			Date	9/16/05	

PAGE 5/7 \* RCVD AT 9/20/2005 12:58:19 PM [Eastern Daylight Time] \* SVR:USPTO-EFXRF-6/24 \* DNIS:2738300 \* CSID:7572535729 \* DURATION (mm-ss):04-06

PTC/SB/08A (08-00)

Approved for use through 10/31/2002. OMB 0851-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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**Complete if Known**

Application Number	10/036,677
Filing Date	December 21, 2001
First Named Inventor	Scott Swix et al.
Group Art Unit	2611
Examiner Name	Bui, Kieu Oanh T.
Attorney Docket Number	BS01421

*(use as many sheets as necessary)*

Sheet	1	of	1
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[illegible]Date  
Considered

<sup>1</sup> Unique citation designation number. <sup>2</sup> Applicant is to place a check mark here if English language Translation is attached.

**Burden Hour Statement:** This form is estimated to take 2.0 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. **DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.**